

# Placement Considerations Checklist for Students who are Deaf and Hard of Hearing

This checklist is intended to assist with placement considerations for deaf or hard of hearing students. Information should be obtained through observation and discussion among the teachers, school staff, and parents. Placement decisions consider the student's communication, academic, and social needs in the context of the proposed learning environment.

## Teacher Interview

Name of School: \_\_\_\_\_ Date of Observation: \_\_\_\_\_

Individual Interviewed: \_\_\_\_\_

Deaf Education Teacher    check type:    classroom    itinerant    consultative    co-teacher  
 General Education Teacher     Special Education Teacher     Other

If not a deaf education teacher, describe previous experience with students who are deaf or hard of hearing: \_\_\_\_\_

Grade: \_\_\_\_\_

Student: adult ratio in classroom: \_\_\_\_\_

Student's communication mode(s): \_\_\_\_\_ Mode(s) observed in classroom: \_\_\_\_\_

Student's language level: Receptive \_\_\_\_\_ Expressive \_\_\_\_\_

Total number of students in classroom: \_\_\_\_\_ Number of students with hearing loss: \_\_\_\_\_

Average speaking/signing distance between teacher and student: \_\_\_\_\_ ft

Amplification used or available:    Personal FM    Classroom FM/Infrared    None   Other \_\_\_\_\_

Educational Interpreter assigned:?    Yes    No    Meets state's minimum standard?    Yes    No

### Related and Support Services:

<u>Area</u>	<u>Available?</u>		<u>Has had training with D/HH?</u>		<u># of hours in classroom/week</u>
Speech-language therapy	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
Educational audiology	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
Occupational therapy/physical therapy	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
Psychology	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
Counseling by psychologist or social worker	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
Other support services available:					
<input type="checkbox"/> Parent counseling and training	<input type="checkbox"/> Deaf/Hard of Hearing Role Models				
<input type="checkbox"/> Transportation	<input type="checkbox"/> Parent Support Groups/Activities				
	<input type="checkbox"/> After school programs				

Comments \_\_\_\_\_

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## Classroom Observation

<b>I. Classroom- Physical Environment</b>	YES	NO
1. Is the room size conducive to learning? (A large room/high ceiling can distort sound; a small room may be noisier.)	_____	_____
2. Is the room adequately lit? (Lighting and shadows may affect speechreading and signing abilities.)	_____	_____
3. Is the ambient noise level for the classroom within recommended standards (noise $\leq 35$ dbA and reverberation $\leq .6$ sec, ANSI S12.60.2002)?	_____	_____
4. Is the room treated to reduce noise (carpet on floor, acoustical ceiling tiles, window coverings, cork or other wall coverings)?	_____	_____
5. Are noise sources in the classroom minimized (e.g., fish tanks, ventilation/heater fans, computers)?	_____	_____
6. Does noise from adjacent spaces (hallways, outside the building) spill over into classroom?	_____	_____
Comments _____		

<b>II. General Learning Environment</b>	YES	NO
7. Does teacher(s)/adult(s) use a variety of techniques to elicit positive behavior from students?	_____	_____
8. Are there a variety of centers (fine motor, art, manipulatives, science, music, dramatic play, sensory, literacy) or opportunities for demonstrating learning?	_____	_____
9. Is there a schedule identifying daily routines?	_____	_____
10. Is there a behavior management system that provides clear structure for the class and consistent rules?	_____	_____
11. Is the curriculum standards-based including a variety of themes, topics, and children's literature?	_____	_____
12. Does the teacher use lesson plans to guide daily activities?	_____	_____
13. Are activities modified to meet a variety of students' needs?	_____	_____
Comments _____		

<b>III. Instructional Style</b>	YES	NO
14. Classroom Discourse and Language		
a. Are the teacher(s) and other adults good language models for the student?	_____	_____
b. Is language consistently accessible to this student? (If sign is used, do all adults in the classroom consistently sign, including their communications with other adults?)	_____	_____
c. Are peer responses repeated?	_____	_____
d. Is vocabulary and language expanded by an adult?	_____	_____
15. Teacher's Speaking Skills		
a. Is enunciation clear?	_____	_____
b. Is rate appropriate?	_____	_____
c. Is loudness appropriate?	_____	_____

- d. Is facial expression used to clarify the message? \_\_\_\_\_
- e. Are gestures used appropriately? \_\_\_\_\_
- f. Are teacher's (or other speaker's) lips available for speechreading? \_\_\_\_\_
- g. Is teacher's style animated? \_\_\_\_\_
- h. Is a buddy system available to provide additional assistance or clarification? \_\_\_\_\_
16. Use of Visual Information
- a. Are props or other visual materials used for stories and activities? \_\_\_\_\_
- b. Are appropriate attention-getting strategies utilized? \_\_\_\_\_
- c. Are overhead projectors, VCRs and other equipment to provide visual supplements utilized? \_\_\_\_\_
- d. Is computerized notetaking, or a comparable procedure, utilized to support access to course content, instruction, and discourse amongst the class? \_\_\_\_\_
17. Oral Discussion/Small Group/Circle Time
- a. Are all students encouraged to share and participate? \_\_\_\_\_
- b. Does the teacher face the students when speaking? \_\_\_\_\_
- c. Do the students face one another when speaking? \_\_\_\_\_
- d. Does the teacher lead group activities in an organized and child-friendly manner? \_\_\_\_\_
- e. Is appropriate wait time utilized to encourage students to think and participate? \_\_\_\_\_
- f. Are students seated within the teacher's "arc of arms"? \_\_\_\_\_
- g. Does teacher obtain eye contact prior to and while speaking? \_\_\_\_\_
- h. Is the FM microphone passed around to all speakers? \_\_\_\_\_
18. Use of Sign \_\_\_\_\_ Not Applicable
- a. If an educational interpreter is assigned to the student, does the interpreter promote student self-advocacy yet assure full access to all communication in the classroom? \_\_\_\_\_
- b. Is the interpreter familiar with the student's IEP, and does s/he know their role in its implementation? \_\_\_\_\_
- c. Is sign consistently used by all adults in the class? \_\_\_\_\_
- d. Are teachers and paras proficient in the sign mode of the child? \_\_\_\_\_
- e. Is sign consistently used by all students in the class? \_\_\_\_\_
- f. Does the type of sign used in the classroom match the signs used by this student? \_\_\_\_\_
- g. Is fingerspelling used? \_\_\_\_\_
- h. Are there opportunities for parents and peers to learn to sign? \_\_\_\_\_
- i. Do they take advantage of them? \_\_\_\_\_
19. Opportunities for Hands-on Experience
- a. Are a variety of materials available? \_\_\_\_\_  
 Check those used:  books  visual props  audio tapes  video tapes  
 objects for dramatic play  manipulatives
- b. Are stories experienced in a variety of ways? \_\_\_\_\_
- c. Are there field trips? \_\_\_\_\_
- e. Are art and sensory activities conducted? \_\_\_\_\_
20. Amplification/Equipment \_\_\_\_\_ Not Applicable
- a. Are personal amplification (hearing aids/cochlear implant) and assistive devices (FM, infrared) checked at school each day? \_\_\_\_\_

b. Is amplification used consistently in all learning environments? \_\_\_\_\_

Comments \_\_\_\_\_

## Reflection

### IV. Individual Student Considerations

YES

NO

#### 21. Communication Considerations & Student's Language Abilities

Think about how this student communicates thoughts, ideas, and needs. Think about how this student communicates and interacts with other students. Will his/her communication needs be nurtured in this classroom environment? Does this student have sufficient language abilities to benefit from instruction in the classroom (generally within 2 years of most students in the class)? Will this student develop English language competency in this environment?

\_\_\_\_\_

\_\_\_\_\_

#### 22. Social Interactions, Self-Concept, and Self-Advocacy

Think about how this student plays alone and in groups. Think about how this student interacts with other students. Will this student's social skills and self-concept be nurtured in this classroom environment? Will this student be encouraged to develop self-advocacy skills?

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\_\_\_\_\_

#### 23. Auditory Skills

Does this student attend well? Is this student able to listen in noise? Think about what this student does when he/she cannot hear? Does this student take responsibility for his/her hearing aids? Will this student's auditory needs be supported in this classroom, lunchroom and all other school environments? Is the staff qualified and able to support the student's auditory needs?

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\_\_\_\_\_

Comments \_\_\_\_\_

### V. School Culture

YES

NO

24. Is there evidence that the school administration supports students with disabilities?

\_\_\_\_\_

\_\_\_\_\_

25. Is the school/district administrator knowledgeable about hearing loss?

\_\_\_\_\_

\_\_\_\_\_

26. Is the school committed to making the necessary accommodations for students with hearing loss?

\_\_\_\_\_

\_\_\_\_\_

27. Is the teacher open to consultation with other professionals or specialists?

\_\_\_\_\_

\_\_\_\_\_

28. Does the teacher provide opportunities for individualized attention?

\_\_\_\_\_

\_\_\_\_\_

29. Is the teacher welcoming of students with special needs?

\_\_\_\_\_

\_\_\_\_\_

30. Is the teacher willing to use amplification technology (hearing aids, FMs, cochlear implants)?

\_\_\_\_\_

\_\_\_\_\_

31. Are the extra-curricular (sports, drama, clubs) staff and settings going to assure communication access for this student?

\_\_\_\_\_

\_\_\_\_\_

Comments \_\_\_\_\_